PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block | for any change of address) 01/27/2010 75035 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Mark A> Litman and Associates, P.A. York Business Center 3209 w. 76th Street Suite 205 (Depositor's name) Litman Edina, MN 55435 (Signature (Date ATTORNEY DOCKET NO. FIRST NAMED INVENTOR CONFIRMATION NO APPLICATION NO. FILING DATE 09/15/2003 Rodney G. Johnson PA0891.AP.US 1571 TITLE OF INVENTION: SHUFFLING APPARATUS AND METHOD 05/03/2010 EAREGAY2 00000066 501391 10663436 01 FC:1501 1510.00 DA **32.00 DA**TOTAL FEE(S) DUE PREV. PAID ISSUE FEE PUBLICATION FEE DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE \$0 \$0 \$1510 04/27/2010 nonprovisional NO \$1510 ART UNIT **CLASS-SUBCLASS EXAMINER** BEAUCHAINE, MARK J 3653 209-552000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 Mark A. Litman Associates P. A (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Las Vegas, Nevada Shuffle Master, Inc. Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🥻 Corporation or other private group entity 🗀 Government 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: S Issue Fee A check is enclosed. ☐ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1341 (enclose an extra copy of this form). Advance Order - # of Copies _____ 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office. Date 4-27-10 Authorized Signature Registration No. 24,390 Α. Mark Typed or printed name This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. 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